

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought

on the invention entitled

"MUTANTS OF INTERLEUKIN 4 SHOWING LOW-AFFINITY AND SHORT-TERM INTERACTION WITH THE COMMON γ CHAIN"

the specification of which is attached hereto,

or was filed on **October 12, 1998**

as a PCT Application Serial No. **PCT/EP98/06448**

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims.

I acknowledge the duty to disclose information which is material to the patentability of this application in accordance with Title 37, Code of Federal Regulations, §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

Prior Foreign Application(s), the priority(ies) of which is/are to be claimed:

97 118 219.1
(Number)

Germany
(Country)

October 21, 1997
(Month/Day/Year Filed)

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose the material information as defined in Title 37, Code of Federal Regulations, §1.56 which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

(Application Serial No.)	(Filing Date)	(Status)
(patented, pending, abandoned)		
(Application Serial No.)	(Filing Date)	(Status)
(patented, pending, abandoned)		

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Le A 32 545-US

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

5
Jeffrey M. Greenman, Reg. No. 26552
Barbara A. Shime, Reg. No. 29862
William F. Gray, Reg. No. 31018
Alice A. Brewer, Reg. No. 32888
Jerrie L. Chiu, Reg. No. 41670

all of Bayer Corporation, 400 Morgan Lane, West Haven, Connecticut 06516

Send Correspondence To: <u>Mr. Jeffrey M. Greenman</u> <u>Bayer Corporation</u> <u>400 Morgan Lane</u> <u>West Haven, Connecticut 06516</u>		Direct Telephone Calls To: (203)812-3964 (Jerrie L. Chiu)
FULL NAME OF SOLE OR FIRST INVENTOR Walter Sebald		INVENTOR'S SIGNATURE <i>W. Sebald</i>
RESIDENCE D 97074 Würzburg, Germany		CITIZENSHIP German
POST OFFICE ADDRESS Meyer-Olberslebenstr. 7, D 97074 Würzburg, Germany		
FULL NAME OF SECOND INVENTOR		INVENTOR'S SIGNATURE
RESIDENCE		CITIZENSHIP
POST OFFICE ADDRESS		
FULL NAME OF THIRD INVENTOR		INVENTOR'S SIGNATURE
RESIDENCE		CITIZENSHIP
POST OFFICE ADDRESS		
FULL NAME OF FOURTH INVENTOR		INVENTOR'S SIGNATURE
RESIDENCE		CITIZENSHIP
POST OFFICE ADDRESS		
FULL NAME OF FIFTH INVENTOR		INVENTOR'S SIGNATURE
RESIDENCE		CITIZENSHIP
POST OFFICE ADDRESS		
FULL NAME OF SIXTH INVENTOR		INVENTOR'S SIGNATURE
RESIDENCE		CITIZENSHIP
POST OFFICE ADDRESS		
FULL NAME OF SEVENTH INVENTOR		INVENTOR'S SIGNATURE
RESIDENCE		CITIZENSHIP
POST OFFICE ADDRESS		